Milford Recreation Department

September 27 & 28

2014 Adult Softball Tournament

All players <u>must</u> print name and sign waiver sheet prior to playing

TEAM NAME:	
------------	--

PLEASE PRINT NAME CLEARLY	EMAIL ADDRESS	SIGNATURE (Waiver Agreement)	READ WAIVER
Recreation Example	recreation@milford.nh.gov	Signature	√

EMERGENCY TREATMENT, RELEASE & WAIVER AGREEMENT:

- ** I am aware of the hazards of the activity/sport and the risk of injury in this athletic program. I certify that I am in good physical condition and am able to safely participate in this physical activity/sport.
- ** I assume all risks and hazards incidental to such participation, including transportation to and from activities, and do hereby waive, release, indemnify and agree to hold harmless the Town Recreation Department, volunteers and staff, team or league sponsors from all liability for any and all loss or damage, and any claim arising out of injury to myself or property damage that might occur, whether caused by negligence of the Town, agents or employees, or during participation.
- ** In case of emergency, I hereby give my permission to the medical personnel selected by the manager and staff, to act as my agent to hospitalize, secure proper treatment for, to order x-rays, routine tests, or other medical treatment for myself.